### STATE OF NEW HAMPSHIRE 2017 Statement of Income and Expenses for LOBBYISTS

(RSA Chapter 15)

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JUL 25 2017

HAMPSHIRE STATE

11115	PLEASE PRINT			NEW HAMPSHIRE DEPARTMENT OF STATE
I. Name of Lobbyist(	s) Donna	$\mathcal{M}$ .	Gamache	DEPARTMENT OF
II. Name of lobbyist'	s partnership, firm or corporation,	if any:		
Olive	EVERSOUTCE me of partnership, firm or corporation)	- En	ergy	
				1// 12:51
Business Address: (St	Commercial St.	<u> </u>	Ochester 1 (State)	(Zip Code)
(603) <u>634-6</u> (Telephone)	9881 (603) <u>634</u>	- <i>2213</i> Fax)	e-mail donna,	gamache o eversource com
	overs: (Choose one – file separate re ransactions which are not attributat			y file a separate report for
1 All reportable tran	sactions occurring in the months prior	r to the rep	orting date relative to the	following client:
	Eversource Ene	2194		
OR	(Full Name of Client as it appears on the	e Lóbbyist I	Registration Form)	
	sactions by the lobbyist (including the cular client.	lobbyist's	family), or the lobbying	firm listed below which are
IV. Date of Report Reports cover: activ	April 26, 2017 []	activ	July 26, 2017 [institution of the state of t	
	October 25, 2017   . activity from 7/1/17 to 9/30/17	acti	January 31, 2018   vity from 10/1/17 to 12/31/	17
	no fees received and no reporta complete just this form and submit it t			
VI. Check if addition	ial reports are attached:			
L If you have receive	ed fees or made expenditures, you mu	ıst file <b>Ad</b> c	lendum A– Fees and Ex	penses
If you have paid a Expense Reimburseme	in honorarium or reimbursed expenses ent	i, you must	file Addendum B- Rep	ort of Honorariums or
If you, your firm,	or your family has made political cont	tributions,	you must file Addendui	n C- Political Contributions
I have read RSA 15, R	<b>firmation by Lobbyist</b> RSA 15-B, RSA 14-C and RSA 664 an est of my knowledge and belief.	nd hereby s	wear or affirm that the fo	oregoing information is true
(Signature of lobbyist	Samache Amoche		7/24/17 (Date	;)
DONNA M 6 (Print Name of lobby	AMACHE			

# PLEASE PRINT

## STATE OF NEW HAMPSHIRE

# Lobbyists Fees and Expenses Addendum A

(RSA Chapter 15:6)

I. Name of Lobbyist(s)	Donna M.	GAM A	che	
II. Name of lobbyist's partne	ership, firm or corporation, i	fany:		
	EVERSUUTCE &	nergy		
				. / /
III. Name of Client	source Energy		Date	7/24/17
to lobbying, including fees for s	fees received from the client ide services such as public advocacy legislation, and related legal we	, government re	elations, o	r public relations serv
a) Total of all fees received in the	nis reporting period		a)\$ <u>/6</u>	,828,16
	s calendar year, prior to this report of all prior monthly reports for th	ting period is calendar year	b) \$ <u>30</u> ;)	,232.90
c) Total of all fees received to c (Add lines a and b)	date		c) \$ <u>47.</u>	,061,06
d) Indicate the amount of any so yet been paid	uch fees that are due, but have no		d) \$	0
fees. Separate reports are to be the lobbyist(s)/firm that are un Expenses are to be reported in during the reporting period for individual expenses where the e lunch where the cost was \$25.00 being lobbied, purchase of a cer (c) an itemized statement of each any purpose not covered by (a) ceremonial object to be given to restaurant expenses for a legisla	ips, firms, or corporations are refiled for expenditures made related to any one client a separate one of three categories of expessalaries, benefits, support staff, expenditure was of \$25.00 or less, purchase of a pen with emonial object given to a person individual expenditure made due (for example: purchase of a monitor of the subject of lobbying with a stive reception). Expenses for expenses for expenses addendums and should	tive to each climate report manness: (a) the and office expess (for example: a value of less being lobbied ring this reportieal with value value greater honorariums, e	ent and if y be filed ggregate tenses; (b) meals pur than \$10 t with a val ng period of greater than \$25, xpense re	expenditures are made I for the lobbyist(s)/fitotal of all expenses at the aggregate total of rehased during a busin that is given to the per- ue of \$25.00 or less); of greater than \$25.00 than \$25, purchase of but not greater than \$ imbursement, or political
support staff, and office expense	this reporting period for salaries, s, related directly or indirectly to	lobbying.		0
<ul> <li>b) Total aggregate of expenditure in a), of \$25 or less.</li> </ul>	res during this reporting period,	not reported	b) \$ ځ	51,37
c) Total of all itemized expendit	aires reported in detail in section	VI	210	0

d) Total expenses for this reporting period	d)\$ 551.37
(Add lines a, b and c)	
e) Total of expenses paid this calendar year, prior to this reporting period (This should be the amount on line f of addendum A for last month's report)	ns 1,780.88
f) Total of all expenses year to date	ns 1,780.88
VI. Other Expenses: Provide the following detail for all expenditures of more than \$25 made from loperiod, including by whom paid or to whom charged.	obbying fees during this reporting
Paid to:	Amount:
	\$
	\$
	\$
	\$
	\$
	\$
Sworn Statement/Affirmation by Lobbyist	
I have read RSA 15, RSA 15-B and RSA 664 and hereby swear or affirm is true and complete to the best of my knowledge and belief.	n that the foregoing information
(Signature of lobbyist)	7   24   17 (Date)
DONUA M. GAMACHE	(Date)
(Print Name of lobbyist)	



### STATE OF NEW HAMPSHIRE

Lobbyists Report of Political Contributions Addendum C (RSA Chapter 15:6)

ship, firm or corp	oration if any	
-	•	
SOURCE		
·		, ,
SSOURCE		Date 7 24 17
hat is reportable pu	ursuant to RSA Chap	,
VID BOUTIN F		
-	Office Candidate i	s Seeking NIH SENIATE.
ord carmate.		
(Last Name)	(First Name)	(Middle Name/Initial)
(Last Name)		(Middle Name/Initial)
		(Middle Name/Initial)
ntribution, provide a	Office Candidate is description of the good	s Seeking
ntribution, provide a	Office Candidate is description of the good	
	Chat is reportable pum, indicate the following BOUTIN FOLIATION (Last Name)	that is reportable pursuant to RSA Chapm, indicate the following:    VID BOUTING FOR UH SENATE (Last Name) (First Name)   Office Candidate intribution, provide a description of the good ion on the line above for amount of contrib

(If more than three contribution	ions were made, report additional con	ntributions on separate addendum C forms.)
Sworn Statement/Affir	rmation by Lobbyist	
	SA 15-B and RSA 664 and here the best of my knowledge and	reby swear or affirm that the foregoing information belief.
January 11 (	uache	7/24/17

### State of New Hampshire Signature Form for Associated Lobbyist RSA Chapter 15

Use this form to swear or affirm the truth and completeness of Income and Expense Statements and related Addendums.

Sworn	Staten	nent/Aff	îrma	tion	by	Lobbyi	st
Statem	ent of	Income	and	Expe	ense	es for:	

Name of Lobbying partnership, firm, or corporat	tion: EVERSOURCE
Name of Client (leave blank if Statement is for t	he partnership, firm, or corporation and not related to any
particular client):	
Date of Report (check one):	
April 26, 2017   July 26, 2017	October 25, 2017   January 31, 2018
	Statement of Income and Expenses described above, and Statement (insert the number of Addendum forms being
Addendum A(s).	
Addendum B(s).	
Addendum B(s).  Addendum C(s).	
I hereby swear or affirm that the foregoing inforcomplete to the best of my knowledge and belief	rmation on the Statement and each Addendum is true and
(Signature of lobbyist)	7/24/17 (Date)
DONNA M GAMACHE	
(Print Name of lobbyist)	